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## BIB DATA SHEET

CONFIRMATION NO. 8961

|   |   |  |  |  |                           |                                |
|---|---|--|--|--|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/517,800  | <b>FILING or 371(c) DATE</b><br>09/12/2005<br><b>RULE</b>   | <b>CLASS</b><br>530                                      | <b>GROUP ART UNIT</b><br>1648                                | <b>ATTORNEY DOCKET NO.</b><br>07039-407US1 |                           |                                |
| <b>APPLICANTS</b><br>Esteban Celis, Rochester, MN;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/US03/18682 06/13/2003<br>which claims benefit of 60/388,625 06/14/2002<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>08/07/2006 |   |  |  |  |                           |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/SHARON L HURT/</u><br>Examiner's Signature  |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>MN                                | <b>SHEETS DRAWINGS</b><br>13               | <b>TOTAL CLAIMS</b><br>15 | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>FISH & RICHARDSON P.C.<br>PO BOX 1022<br>MINNEAPOLIS, MN 55440-1022<br>UNITED STATES  |   |  |  |  |                           |                                |
| <b>TITLE</b><br>Epstein-barr virus-specific immunization  |   |  |  |  |                           |                                |
| <b>FILING FEE RECEIVED</b><br>515   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees                            |  |                           |                                |
|   |   |  | <input type="checkbox"/> 1.16 Fees (Filing)                  |  |                           |                                |
|   |   |  | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |  |                           |                                |
|   |   |  | <input type="checkbox"/> 1.18 Fees (Issue)                   |  |                           |                                |
|   |   |  | <input type="checkbox"/> Other _____                         |  |                           |                                |
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